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| <b>TRANSMITTAL FORM</b><br><i>(to be used for all correspondence after initial filing)</i> | Application Number   | 09/595,599             | <b>RECEIVED</b><br><b>OCT 12 2004</b><br><b>Technology Center 2600</b> |
|  | Filing Date          | Jun 15, 2000           |  |
|  | First Named Inventor | Banga, Gaurav          |  |
|  | Art Unit             | 2667                   |  |
|  | Examiner Name        | Yao, K.                |  |
| Total Number of Pages in This Submission   | 11                   | Attorney Docket Number | 103.1043.01  |

| ENCLOSURES (check all that apply)   |  |  |
|---|--|--|
| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input checked="" type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br>Return Postcard |
| <div>Remarks</div>  |  |  |

| SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT |                      |                 |
|--|----------------------|-----------------|
| Firm or Individual name                    | Steven A. Swernofsky | Reg. No. 33,040 |
| Signature                                  |                      |                 |
| Date                                       | 9-30-2004            |                 |

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| Type or printed name  | DOPE STOLUX |      |           |
| Signature   |             | Date | 9/30/2004 |

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22883

103.1043.01

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re Application of:

Guarav BANGA *et al.*

Serial No.: 09/595,599

Filed: June 15, 2000

For: Prevention and Detection of IP  
Identification Wraparound Errors

Art Unit: 2667

Examiner: Kwang B. YAO

Tel: (703) 308-7583

Office Action Mailed:

July 13, 2004

**RECEIVED**

**OCT 12 2004**

**Technology Center 2600**

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**RESPONSE TO OFFICE ACTION**

Sir:

This paper is responsive to the outstanding Office action mailed on July 13, 2004 (the "Office Action"). The Office Action set a three month period for response. Because this Response is being filed timely within the three month period, no extension of time fee is due. If the Applicants' attorney is mistaken in this regard, Applicants conditionally petition for an extension of

time under 37 CFR §1.136(a)(3), and authorization is hereby granted to charge all required extension of time fees under 37 CFR §1.17 to Deposit Account No. 50-0365. Authorization is also granted to charge additional claim fees, if any, and all other fees necessary to file this Response, to the same Deposit Account. A separate paper authorizing the charges is attached to this paper.

Amendments to the claims are reflected in the listing of claims that begins on page 3 of this paper.

Remarks begin on page 7 of this paper.